



TRANSPORT OF PATIENTS (BLS)

In the prehospital setting or during interfacility transport, a certified EMT-I or supervised EMT-I trainee who has received appropriate training may monitor peripheral lines delivering intravenous fluids, Foley catheters, heparin locks, nasogastric tubes and gastrostomy tubes under Section 10015(b), Title 22 of the California Health and Safety Code provided the following conditions are met:

1. An EMT-I may monitor peripheral lines delivering intravenous fluids during interfacility transport and in the prehospital setting with the following restrictions:
 - a. Interfacility transfers: The patient is not critical and deemed stable by the transferring physician and that physician authorizes transport.
 - b. Scene transport: The patient is not critical and the base station physician approves transport by an EMT-I.
 - c. No medications have been added to the intravenous fluids.
 - d. In the prehospital setting, no other advanced life support procedures have been initiated.
2. The EMT-I shall:
 - a. Monitor and maintain the IV at a preset rate.
 - b. Check the tubing for kinks and reposition the arm if necessary when loss of flow occurs.
 - c. Control the bleeding at the IV site.
 - d. Turn off the flow of intravenous fluid if infiltration or alteration of flow occurs. Vital signs should then be monitored frequently.
 - e. Transfer patient with any combination/concentration of:
 - i. D5/water with or without:
 - 1.) Normal Saline
 - 2.) Lactated Ringers

- 3.) Isolyte or Isolyte M
 - ii. Normal Saline
 - iii. Lactated Ringers
3. An EMT-I may transport a patient with a heparin lock provided:
 - a. The patient is not critical and deemed stable by the transferring Physician or Base Station physician and the transferring physician approves transport by an EMT-I.
 - b. The EMT-I shall:
 - i. Monitor the heparin lock only as placed at time of transfer.
 - ii. Control any bleeding at insertion site.
4. An EMT-I may transport a patient with a Foley catheter provided:
 - a. The patient is noncritical and deemed stable by the transferring Physician or Base station Physician and the transferring physician approves transport by an EMT-I.
 - b. The catheter is able to drain freely to gravity.
 - c. No action is taken to impede flow or disrupt contents of drainage collection bag.
5. An EMT-I may transport a patient with a nasogastric tube or gastrostomy tube provided:
 - a. The patient is not critical and deemed stable by the transferring Physician or Base Station Physician and the physician approves transport by an EMT-I.
 - b. Nasogastric and gastrostomy tubes are clamped.
 - c. All patients who have received fluids prior to transport are transferred in semi-fowlers position to prevent aspiration unless contraindicated.
6. If at any time the patient's condition deteriorates, the patient should be transported to the closest Receiving Hospital.